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| Fill in this information to identify your ca | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Marko Marina government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). **Alempic** Mijatovic Bring your picture Last Name Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name Only the last 4 digits of $xxx - xx - \underline{7} \underline{6} \underline{3} \underline{7}$ xxx - xx - 1 0 5 1your Social Security number or federal OR **Individual Taxpayer** Identification number (ITIN) Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Alempic Trans, Inc **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and

doing business as names

Business name

Business name

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| | btor 1 btor 2 | Marko Alempic Marina Mijatovic | | | Case number (i | if known) | |
|----|------------------|-----------------------------------|-----------------------------|--|---|--|--|
| | | | About Debtor | · 1: | About Del | btor 2 (Spouse Only in a Joint Case): | |
| | | | | | EIN | | |
| _ | 14/1 | P | | | EIN | | |
| 5. | Where | you live | | | If Debtor 2 | 2 lives at a different address: | |
| | | | 441 Esselen Number Stree | | Number | Street | |
| | | | | | | | |
| | | | | | | | |
| | | | Carol Stream City | m IL 60188 State ZIP Code | City | State ZIP Code | |
| | | | DuPage County | | County | | |
| | | | · | | • | | |
| | | | the one above | g address is different from e, fill it in here. Note that the I any notices to you at this ss. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. | | |
| | | | Number Stree | et | Number Street | | |
| | | | P.O. Box | | P.O. Box | _ | |
| | | | City | State ZIP Code | City | State ZIP Code | |
| 6. | | ou are choosing | Check one: | | Check one | э : | |
| | | district to file for kruptcy | petition, I | last 180 days before filing this I have lived in this district longer ny other district. | petitio | the last 180 days before filing this on, I have lived in this district longer in any other district. | |
| | | | | nother reason. Explain. U.S.C. § 1408.) | | e another reason. Explain. 28 U.S.C. § 1408.) | |
| P | art 2: | Tell the Court Al | oout Your Ban | kruptcy Case | | | |
| | | apter of the uptcy Code you | | or a brief description of each, see N (Form 2010)). Also, go to the top of | | by 11 U.S.C. § 342(b) for Individuals Filing neck the appropriate box. | |
| | are cho | oosing to file | Chapter 7 | | | | |
| | | | Chapter 11 | I | | | |
| | | | Chapter 12 | 2 | | | |
| | | | Chapter 13 | 3 | | | |
| | | | | | | | |

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | | | Case number (if known) | | | | | | |
|--|------------------------|---|------------------------|--|--|--------------------------------------|---|---|--|
| 8. | How you | ı will pay the fee | | court pay v | I pay the entire fee when I file my petitit t for more details about how you may pay with cash, cashier's check, or money orde llf, your attorney may pay with a credit can | . Typical er. If you | lly, if you are pay r attorney is subi | ring the fee yourself, you may mitting your payment on your | |
| | | | | I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). | | | | | |
| | | | | By la than fee ir | nuest that my fee be waived (You may row, a judge may, but is not required to, wa 150% of the official poverty line that apply in installments). If you choose this option gree Waived (Official Form 103B) and file | ive your lies to you , you mus | fee, and may do ur family size an st fill out the App | so only if your income is less d you are unable to pay the | |
| 9. | • | u filed for | | No | | | | | |
| | - | bankruptcy within the last 8 years? | | Yes. | | | | | |
| | | Dist | rict _ | | _ When | | Case number | | |
| | | | Dist | rict _ | | | | Case number | |
| | | | Dist | rict _ | | _ When | MM / DD / YYYY | Case number | |
| 10. | cases pe | e any bankruptcy ses pending or being ed by a spouse who is | ☑ | No Yes. | | | | | |
| | _ | y this case with by a business | Deb | tor _ | | | Relationsh | ip to you | |
| | partner, affiliate? | • | Dist | rict _ | | _ When | MM / DD / YYYY | Case number,if known | |
| | | | Deb | tor _ | | | Relationsh | ip to you | |
| | | | Dist | rict _ | | _ When | MM / DD / YYYY | Case number,if known | |
| 11. | Do you r residenc | • | | No. Yes. | Go to line 12. Has your landlord obtained an eviction residence? | judgmen | t against you and | d do you want to stay in your | |
| | | | | | No. Go to line 12. Yes. Fill out Initial Statement Abo | | • | • , | |

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| | tor 1 Marko Alempic tor 2 Marina Mijatovic | | | | | _ Case num | ber (if known) | |
|-----|--|---------------|-------------------|--|---|---|---|--|
| Pa | Report About A | ny Bı | usine | sses You Own as | a Sole P | roprietor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | | | Go to Part 4. Name and location of b | ousiness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business, if any Number Street | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | | City Check the appropriate Health Care Busi Single Asset Rea Stockbroker (as of Commodity Broke) None of the above | iness (as d al Estate (a defined in 1 er (as defin | efined in 11 U.S.s s defined in 11 U I1 U.S.C. § 101(| .C. § 101(27A)) J.S.C. § 101(51B) 53A)) | ZIP Code |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business | car | set ap st rece | opropriate deadlines. If | you indicat nent of ope | e that you are a erations, cash-flo | small business de w statement, and | Il business debtor so that it betor, you must attach your federal income tax return 116(1)(B). |
| | debtor? | $ \sqrt{} $ | No. | I am not filing under C | hapter 11. | | | |
| | For a definition of small business debtor, see | | No. | I am filing under Chap the Bankruptcy Code. | ter 11, but | I am NOT a sma | all business debto | r according to the definition in |
| | 11 U.S.C. § 101(51D). | | Yes. | I am filing under Chap Bankruptcy Code. | ter 11 and | I am a small bus | siness debtor acco | ording to the definition in the |
| Pa | Report If You O | wn o | r Hav | e Any Hazardous I | Property | or Any Prop | erty That Nee | ds Immediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable | | No Yes. | What is the hazard? | | | | |
| | hazard to public health or safety? Or do you own any property that needs immediate attention? | | | If immediate attention | is needed, | why is it needed | ?t | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is the property | ? Number | Street | | |
| | | | | | | | | |
| | | | | | City | | | State ZIP Code |

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| Debtor 1 | Marko Alempic | |
|----------|------------------|------------------------|
| Debtor 2 | Marina Mijatovic | Case number (if known) |

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing | abou |
|---|------|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not require | ed to r | eceive a | brieting | about |
|------------------|---------|----------|----------|-------|
| credit counseli | ng bed | ause of: | : | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Debtor 1 Debtor 2 | | Marko Alempic Marina Mijatovic | Case number (if known) | | | | | | | |
|----------------------|------------------------------|--|--|---------------------------------|---|-------------------|--|--------|--|--|
| P | art 6: | Answer These Q | uesti | ons f | or Reporting | Purpos | ses | | | |
| 16. | What k have? | ind of debts do you | 16a. | | • | ividual pr 6b. | sumer debts? Consumer de imarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." | |
| | | | 16b. | mor | ey for a business No. Go to line 16 Yes. Go to line 1 | | | | | |
| | | | 16c. | Stat | e the type of debts | s you owe | e that are not consumer or bu | siness | s debts. | |
| 17. | - | Are you filing under Chapter 7? | | No. | I am not filing und | der Chap | ter 7. Go to line 18. | | | |
| | - | estimate that after empt property is | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded administrative expenses are paid that funds will be available to distribute to unsecured contact the contact of the contact | | | | | | | |
| | admini are pai availab | administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | | ✓ No Yes | | | | | |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-1 200-9 | 99 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 | |
| 19. | | uch do you te your assets to th? | | \$100, | 0,000 01-\$100,000 001-\$500,000 001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| 20. | | uch do you te your liabilities to | | \$100, | 0,000 01-\$100,000 001-\$500,000 001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | | Case number (if known) | | |
|----------------------|-----------------------------------|--|--|--|--|
| Part 7: | Sign Below | | | | |
| For you | | I have examined this petition, and I declare under and correct. | penalty of perjury that the information provided is true | | |
| | | • | e that I may proceed, if eligible, under Chapter 7, 11, 12, the relief available under each chapter, and I choose to | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help r fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | |
| | | I request relief in accordance with the chapter of til | tle 11, United States Code, specified in this petition. | | |
| | | I understand making a false statement, concealing property, or obtaining money or property by fraud connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 y or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | |
| | | X /s/ Marko Alempic | X /s/ Marina Mijatovic | | |
| | | Marko Alempic, Debtor 1 | Marina Mijatovic, Debtor 2 | | |
| | | Executed on 09/06/2017 | Executed on 09/06/2017 | | |

MM / DD / YYYY

MM / DD / YYYY

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | | Case number (if know | vn) | | | | |
|----------------------|--|---|---------------------------------|-----------------------------------|--|--|--|--|
| • | attorney, if you are ed by one | I, the attorney for the debtor(s) named in this eligibility to proceed under Chapter 7, 11, 12 relief available under each chapter for which | , or 13 of title 11, United Sta | ates Code, and have explained the | | | | |
| • | not represented by by, you do not need page. | the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | | |
| | | X /s/ Charles Wm. Dobra Signature of Attorney for Debtor | Date | 09/06/2017 MM / DD / YYYY | | | | |
| | | Charles Wm. Dobra Printed name | | | | | | |
| | | Charles Wm. Dobra, Ltd. | | | | | | |
| | | 675 E. Irving Park Road Number Street | | | | | | |
| | | Suite 100 | | | | | | |
| | | | | 20470 | | | | |
| | | Roselle City | IL State | ZIP Code | | | | |
| | | Contact phone (630) 893-2494 | Email address <u>Justic</u> | ce@DobraLawFirm.com | | | | |
| | | 0647039 | <u>IL</u> | _ | | | | |
| | | Bar number | State | | | | | |

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| Fill in this in | formation to ide | entify your ca | se and this filing: | | |
|---|--|--|---|---|--------------------------------------|
| Debtor 1 | Marko | | Alempic | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing | Marina Tirst Name | Middle Name | Mijatovic Last Name | | |
| (Opodse, ii ming | y) Thousand | Wilddic Name | Edst Nume | | |
| United States B | ankruptcy Court for th | ne: NORTHERN | N DISTRICT OF ILLINOIS | | |
| Case number | | | | ☐ Check | if this is an |
| (if known) | | | | amend | ed filing |
| | | | | | |
| Official Forn | | | | | |
| Schedule A | VB: Property | | | | 12/15 |
| the asset in the of filing together, b sheet to this form | category where you oth are equally resp m. On the top of any | think it fits best consible for supp additional page | . List an asset only once. If an as a. Be as complete and accurate as plying correct information. If mor es, write your name and case nun ding, Land, or Other Real E | s possible. If two married pe e space is needed, attach a s nber (if known). Answer eve | ople are separate ry question. |
| | | | | | |
| - | | r equitable inter | est in any residence, building, lar | nd, or similar property? | |
| <u> </u> | to Part 2. /here is the property? | • | | | |
| | | | all of commentation from Don't 4 inc | | |
| | • | - | all of your entries from Part 1, inc Write that number here | | \$0.00 |
| Part 2: De | escribe Your Vel | hicles | | | |
| • | | • | st in any vehicles, whether they are cle, also report it on Schedule G: Ex | _ | • |
| 3. Cars, vans, | trucks, tractors, spe | ort utility vehicle | es, motorcycles | | |
| □ No ☑ Yes | | | | | |
| 3.1. | | | as an interest in the property? | Do not deduct secured clair | • |
| Make: | vw | Check | | amount of any secured clair Creditors Who Have Claims | |
| Model: | Passat | | ebtor 1 only ebtor 2 only | Current value of the | Current value of the |
| Year: | 2006 | | ebtor 1 and Debtor 2 only | entire property? | portion you own? |
| Approximate mile | , <u>, </u> | — □ At | least one of the debtors and anothe | \$684.00 | \$684.00 |
| Other information 2006 VW Passamiles) | : at (approx. 99000 | | neck if this is community property ee instructions) | | |
| 3.2. | \0A4 | | as an interest in the property? | Do not deduct secured clair | • |
| Make: | VW | Check | one. ebtor 1 only | amount of any secured clair Creditors Who Have Claims | |
| Model: | Passat | | ebtor 2 only | Current value of the | Current value of the |
| Year: | 2014 | — <u></u> De | ebtor 1 and Debtor 2 only | entire property? | portion you own? |
| Approximate mile Other information | | | least one of the debtors and anothe | sr \$8,181.00 | \$8,181.00 |
| | : at(approx 45,000 | ┌ Ch | neck if this is community property | | |
| miles) | (| | ee instructions) | | |

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| | otor 1 otor 2 | Marko Alempic Marina Mijatovic Case number (if known) | |
|-----|---------------------------|--|---|
| 4. | Exam _l ✓ No | | |
| 5. | | ne dollar value of the portion you own for all of your entries from Part 2, including any | #0.005.00 |
| | entrie | s for pages you have attached for Part 2. Write that number here | \$8,865.00 |
| Р | art 3: | Describe Your Personal and Household Items | |
| Do | you ow | n or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | | hold goods and furnishings oles: Major appliances, furniture, linens, china, kitchenware | |
| | □ No | | |
| | | ss. Describe Blender, comforters, queen bed, full bed and twin bed | \$500.00 |
| 7. | Electro Examp | onics oles: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games | |
| | □ No | ss. Describe Mac lap-top, HP printer, IPhone 6s and IPhone 6 plus, and speaker base | \$750.00 |
| 8. | | tibles of value bles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | |
| | ✓ No | es. Describe | |
| 9. | | ment for sports and hobbies bles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments | |
| | ✓ No | es. Describe | |
| 10. | Firear Examp | ms oles: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | ✓ No | es. Describe | |
| 11. | Clothe Examp | es coles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| | □ No ✓ Ye | es. Describe Wearing appareal | \$750.00 |
| 12. | Jewel Examp | ry bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | |
| | ☐ No | es. Describe Fassil watch, white gold ring, white gold necklace | \$750.00 |
| 13. | | arm animals oles: Dogs, cats, birds, horses | |
| | ☑ No | os Describe | |

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| | | Marko Alempic Marina Mijatovic | | | Case number (if known) | |
|------|-----------------|------------------------------------|-------------|--|------------------------------|---|
| 14. | Any oth | • | usehold | items you did not already list, including ar | ny health aids you | |
| | | . Give specific rmation Boo | dy temp | erture thermostat | | \$40.00 |
| 15. | | | | ntries from Part 3, including any entries fo | | \$2,790.00 |
| Pa | art 4: | Describe Your | | | | |
| Do y | ou own | or have any legal o | r equitab | le interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Example | es: Money you have petition | in your w | allet, in your home, in a safe deposit box, and | d on hand when you file your | |
| | □ No Yes | | | | Cash: | \$100.00 |
| 17. | • | | s, and otl | er financial accounts; certificates of deposit; soner similar institutions. If you have multiple a | | |
| | ✓ Yes | | | Institution name: | | |
| | 17. | 1. Checking accou | unt: | Checking account with JP Morgan Cl | hase (5630) | \$64.18 |
| | 17. | 2. Checking accou | unt: | Checking accountwith JP Morgan Ch | iase (1894) | (\$134.53) |
| | 17. | 3. Checking accou | unt: | Checking account through Chase | | (\$650.00) |
| | 17. | 4. Checking accou | unt: | Checking account through Bank of A | merica | \$660.32 |
| | 17. | 5. Savings accour | nt: | Savings account with JP Morgan Cha | ase (9713) | \$0.46 |
| | 17. | 6. Savings accour | nt: | Savings account with JP Morgan Cha | ase (4250) | \$42.56 |
| | 17. | 7. Other financial | account: | Other financial account; checking ac Chase (approximate amount; it went the account | | (\$2,900.00) |
| 18. | Example | mutual funds, or pu | - | aded stocks accounts with brokerage firms, money market | accounts | |
| | ✓ No ☐ Yes | I | Institutior | or issuer name: | | |
| 19. | Non-pu | | and inter | ests in incorporated and unincorporated b | ousinesses, including | |
| | □ No | | | | | |
| | | . Give specific rmation about | | | | |
| | _ | | Name of | entity: | % of ownership: | |
| | | | Alempio | Trans Inc | 100% | \$0.00 |

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| | tor 1 tor 2 | Marko Alempic Marina Mijatovic Case number (if known) | |
|-------|-------------------|--|--|
| 20. | Negotia | ment and corporate bonds and other negotiable and non-negotiable instruments when the instruments include personal checks, cashiers' checks, promissory notes, and money orders. In gotiable instruments are those you cannot transfer to someone by signing or delivering them. | |
| | info | s. Give specific rmation about m Issuer name: | |
| 21. | | nent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| | | s. List each ount separately. Type of account: Institution name: | |
| 22. | Your sh Exampl | y deposits and prepayments are of all unused deposits you have made so that you may continue service or use from a company es: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications nies, or others | |
| | √ No | | |
| | _ | Institution name or individual: | |
| 23. | ☑ No | es (A contract for a specific periodic payment of money to you, either for life or for a number of years) | |
| 24. | Interes | ts in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition pro C. §§ 530(b)(1), 529A(b), and 529(b)(1). | gram. |
| | ✓ No ☐ Yes | | § 521(c) |
| 25. | | equitable or future interests in property (other than anything listed in line 1), and rights or exercisable for your benefit | |
| | | s. Give specific ormation about them | |
| 26. | | s, copyrights, trademarks, trade secrets, and other intellectual property; les: Internet domain names, websites, proceeds from royalties and licensing agreements | |
| | | s. Give specific | |
| 27. | License | es, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licens | ses |
| | ✓ No | s. Give specific | |
| Mor | | | Current value of the |
| IVIOI | iey Oi pi | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | unds owed to you | |
| | ⋈ No | | |
| | Yes | s. Give specific information Federal: | |
| | | out them, including whether already filed the returns State: | |
| | | I the tax years | |
| | | | |

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| Deb | tor 1 | Marko Alempic | | | |
|-----|--------------|---|---------------------------------------|------------------------------------|--|
| Deb | tor 2 | Marina Mijatovic | Case number (if known) | | |
| 29. | Examp | r support oles: Past due or lump sum alimony, spousal support, child support, ma | aintenance, divorce settlement, prope | rty settlement | |
| | ✓ No | o ss. Give specific information | Alimony: | | |
| | _ | | Maintenance: | | |
| | | | Support: | | |
| | | | Divorce settlemer | nt: | |
| | | | Property settleme | nt: | |
| 30. | Examp ✓ No | amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits, someone compensation, Social Security benefits; unpaid loans you made to be seeing information. | | | |
| 31. | Examp No Yes | sts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); cs. Name the insurance mpany of each policy d list its value | | ance Surrender or refund value: | |
| 32. | If you a | terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurand to receive property because someone has died | ce policy, or are currently | | |
| | ✓ No ☐ Ye | s. Give specific information | | | |
| 33. | | s against third parties, whether or not you have filed a lawsuit or moles: Accidents, employment disputes, insurance claims, or rights to su | | | |
| | ✓ No ☐ Ye | s. Describe each claim | | | |
| 34. | | contingent and unliquidated claims of every nature, including cour to set off claims | nterclaims of the debtor and | | |
| | ✓ No ☐ Ye | s. Describe each claim | | | |
| 35. | Any fir | nancial assets you did not already list | | | |
| | ✓ No | ss. Give specific information | | | |
| 36. | | ne dollar value of all of your entries from Part 4, including any entri ed for Part 4. Write that number here | _ | (\$2,817.01) | |
| Pa | art 5: | Describe Any Business-Related Property You Own or | Have an Interest In. List any | real estate in Part 1. | |
| 37. | Do you | u own or have any legal or equitable interest in any business-relate | ed property? | | |
| | _ | o. Go to Part 6. ss. Go to line 38. | | | |

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| | tor 1 tor 2 | Marko Alempic | |
|-------------|------------------|---|---|
| Deb | lor Z | Marina Mijatovic Case number (if known) | |
| 38. | Accou | nts receivable or commissions you already earned | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | • | |
| | ✓ No ☐ Ye | s. Describe | |
| 39. | | equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | |
| | ✓ No | s. Describe | |
| 40. | Machir | nery, fixtures, equipment, supplies you use in business, and tools of your trade | |
| | ✓ No ☐ Ye | s. Describe | |
| 41. | Invento | pry | |
| | ✓ No ☐ Ye | s. Describe | |
| 42. | Interes | ts in partnerships or joint ventures | |
| | ✓ No | s. Describe Name of entity: % of ownership: | |
| 43. | Custor | ner lists, mailing lists, or other compilations | |
| | ✓ No ☐ Ye | s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe | |
| 44. | Any bu | siness-related property you did not already list | |
| | ✓ No | s. Give specific information. | |
| 45. | | e dollar value of all of your entries from Part 5, including any entries for pages you have ed for Part 5. Write that number here | \$0.00 |
| Pa | | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1. | n Interest In. |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | | . Go to Part 7. s. Go to line 47. | |
| 47 | Farm a | nimals | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| → 1. | | les: Livestock, poultry, farm-raised fish | |
| | ✓ No ☐ Ye | | |
| | ⊔ ^{re:} | J | |

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| Deb | tor 2 Marina Mijatovic | Case nu | ımber (if known) | |
|-----|--|----------------------|------------------------------|-------------|
| 48. | Cropseither growing or harvested | | | |
| | ✓ No ☐ Yes. Give specific information | | | |
| 49. | Farm and fishing equipment, implements, machinery, fixtures, | and tools of trade | | |
| | ✓ No ☐ Yes | | | |
| 50. | Farm and fishing supplies, chemicals, and feed | | | |
| | ✓ No ☐ Yes | | | |
| 51. | Any farm- and commercial fishing-related property you did not | already list | | |
| | ✓ No Yes. Give specific information | | | |
| 52. | Add the dollar value of all of your entries from Part 6, including attached for Part 6. Write that number here | | | \$0.00 |
| Pa | art 7: Describe All Property You Own or Have an In | terest in That You D | oid Not List Above | 9 |
| 53. | Do you have other property of any kind you did not already list Examples: Season tickets, country club membership | ? | | |
| | ✓ No✓ Yes. Give specific information. | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write the | at number here | | \$0.00 |
| Pa | art 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | → | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$8,865.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$2,790.00 | | |
| 58. | Part 4: Total financial assets, line 36 | (\$2,817.01) | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | . \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$8,837.99 | Copy personal property total | +\$8,837.99 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$8,837.99 |

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| Fill in this in | formation to id | lentify your | case: | | | |
|--|--|--|---|--|---|---|
| Debtor 1 | Marko First Name | Middle Nar | Alempio | | | |
| Debtor 2 | Marina | | Mijatovi | | | |
| (Spouse, if filing) | | Middle Nar | | | 1010 | |
| | inkruptcy Court for | the: NORTH | ERN DISTRICT OF | ILLIN | IOIS | Check if this is an |
| Case number (if known) | | | | | | amended filing |
| Official Form | 106C | | | | | |
| Schedule C | : The Prope | rty You C | laim as Exem | pt | | 0 |
| Using the property space is needed, f | you listed on Sch | edule A/B: Pro this page as | perty (Official Form 1 | 06A/B) | as your source, list th | esponsible for supplying correct informa e property that you claim as exempt. If ssary. On the top of any additional pag |
| s to state a spec exempted up to t | ific dollar amount he amount of any | as exempt. A applicable sta | Alternatively, you ma atutory limit. Some e ent fundsmay be u | y claii exemp nlimite | m the full fair market tionssuch as those ed in dollar amount. I | you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an ar amount and the value of the |
| exemption of 100 | % of fair market v | | | • | mited to the applicab | |
| exemption of 100 property is deteri | % of fair market v mined to exceed t | hat amount, y | | • | • | |
| Part 1: Ide | % of fair market volumed to exceed the extending the Properson exemptions are y | hat amount, y erty You Cl vou claiming? | laim as Exempt Check one only | d be li | mited to the applicab | le statutory amount. |
| Part 1: Ide Which set of | % of fair market we mined to exceed to entify the Propexemptions are you claiming state and | erty You Cl rou claiming? federal nonba | our exemption would | d be li | mited to the applicab | le statutory amount. |
| Part 1: Ide 1. Which set of You are You are | % of fair market valued to exceed to entify the Propexemptions are yallowing state and claiming federal ex | erty You Cl rou claiming? federal nonba kemptions. 11 | Check one only unkruptcy exemptions. U.S.C. § 522(b)(2) | , even | mited to the applicab | le statutory amount. with you. |
| Part 1: Ide 1. Which set of You are You are For any properties of the set | % of fair market valued to exceed to entify the Propexemptions are yallowing state and claiming federal ex | erty You Claiming? federal nonbackemptions. 11 chedule A/B tond line on | Check one only unkruptcy exemptions. U.S.C. § 522(b)(2) | , even 11 U. empt, 1 | if your spouse is filing S.C. § 522(b)(3) | le statutory amount. with you. |
| Part 1: Ide 1. Which set of You are You are For any properties of the set | % of fair market we mined to exceed to entify the Propexemptions are year claiming state and claiming federal experty you list on Sof the property are | erty You Claiming? federal nonbackemptions. 11 chedule A/B tond line on | Check one only unkruptcy exemptions. U.S.C. § 522(b)(2) that you claim as exe Current value of the portion you own | , even 11 U. Am exe | if your spouse is filing S.C. § 522(b)(3) fill in the information ount of the | with you. |
| Part 1: Ide Note: | % of fair market we mined to exceed to entify the Propexemptions are year claiming state and claiming federal experty you list on Sof the property are | erty You Claiming? federal nonbackemptions. 11 chedule A/B tond line on | Check one only unkruptcy exemptions. U.S.C. § 522(b)(2) that you claim as exe Current value of the portion you own Copy the value from | , even 11 U empt, 1 Am exe | if your spouse is filing S.C. § 522(b)(3) fill in the information ount of the mption you claim | with you. |
| Part 1: Ide Note: | % of fair market we mined to exceed to entify the Propexemptions are year claiming state and claiming federal experty you list on Sof the property are | erty You Claiming? federal nonbackemptions. 11 chedule A/B tond line on | Check one only Inkruptcy exemptions. U.S.C. § 522(b)(2) Ithat you claim as exe Current value of the portion you own Copy the value from Schedule A/B | , even 11 U. Am exe | if your spouse is filing S.C. § 522(b)(3) fill in the information ount of the mption you claim eck only one box for th exemption \$0.00 100% of fair market | with you. below. Specific laws that allow exemption |
| Part 1: Ide 1. Which set of You are You are C. For any properties description Schedule A/B that | % of fair market valued to exceed to exceed to exceed to exceed to exceed to exceed to exemptions are you claiming state and claiming federal experty you list on S of the property art lists this property to the exceeding the e | erty You Claiming? federal nonbackemptions. 11 chedule A/B tond line on | Check one only Inkruptcy exemptions. U.S.C. § 522(b)(2) Ithat you claim as exe Current value of the portion you own Copy the value from Schedule A/B | , even 11 U empt, 1 Am exe | if your spouse is filing S.C. § 522(b)(3) fill in the information ount of the mption you claim eck only one box for the exemption \$0.00 | with you. below. Specific laws that allow exemption |
| Part 1: Ide Note: The | % of fair market with the Property of the property are tilests this property at tilests this property are tilests this property are tilests. | erty You Claiming? federal nonbackemptions. 11 schedule A/B to ad line on the control of the con | Check one only Inkruptcy exemptions. U.S.C. § 522(b)(2) Ithat you claim as exe Current value of the portion you own Copy the value from Schedule A/B | , even 11 U empt, 1 Am exe | if your spouse is filing S.C. § 522(b)(3) fill in the information ount of the mption you claim eck only one box for th exemption \$0.00 100% of fair market value, up to any applicable statutory limit \$500.00 | with you. below. Specific laws that allow exemption |
| Part 1: Ide 1. Which set of You are You are Care Horself description: | % of fair market valued to exceed to exceed to exceed to exceed to exceed to exceed to exemptions are you claiming state and claiming federal experty you list on S of the property art lists this property to the exceeding the e | erty You Claiming? federal nonbackemptions. 11 schedule A/B to ad line on the control of the con | Check one only Inkruptcy exemptions. U.S.C. § 522(b)(2) Ithat you claim as exe Current value of the portion you own Copy the value from Schedule A/B \$684.00 | empt, 1 Am exe cac | if your spouse is filing S.C. § 522(b)(3) fill in the information ount of the mption you claim eck only one box for the exemption \$0.00 100% of fair market value, up to any applicable statutory limit | below. Specific laws that allow exemption 735 ILCS 5/12-1001(c) |

3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

√ No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? □ No ☐ Yes

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Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$750.00 \$750.00 735 ILCS 5/12-1001(b) \square Mac lap-top, HP printer, IPhone 6s and 100% of fair market IPhone 6 plus, and speaker base value, up to any applicable statutory Line from Schedule A/B: 7 limit \$750.00 Brief description: \$750.00 735 ILCS 5/12-1001(a), (e) $\overline{\mathbf{Q}}$ Wearing appareal 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$750.00 \$750.00 735 ILCS 5/12-1001(b) $\overline{\mathbf{A}}$ Fassil watch, white gold ring, white gold 100% of fair market necklace value, up to any applicable statutory Line from Schedule A/B: 12 limit Brief description: \$40.00 \$40.00 735 ILCS 5/12-1001(b) ablaBody temperture thermostat 100% of fair market value, up to any Line from Schedule A/B: 14 applicable statutory limit Brief description: \$100.00 \$100.00 735 ILCS 5/12-1001(b) $\sqrt{}$ Cash 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: \$64.18 735 ILCS 5/12-1001(b) \$64.18 $\sqrt{}$ Checking account with JP Morgan Chase 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: (\$134.53) 735 ILCS 5/12-1001(b) \$0.00 \square Checking account with JP Morgan Chase 100% of fair market (1894)value, up to any Line from Schedule A/B: 17.2 applicable statutory limit Brief description: \$0.46 735 ILCS 5/12-1001(b) $oldsymbol{
abla}$ \$0.46 Savings account with JP Morgan Chase 100% of fair market (9713)value, up to any Line from Schedule A/B: 17.5 applicable statutory limit Brief description: \$42.56 \$42.56 735 ILCS 5/12-1001(b) $\overline{\mathbf{A}}$ Savings account with JP Morgan Chase 100% of fair market (4250)value, up to any applicable statutory Line from Schedule A/B: 17.6 limit

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Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic Case number (if known) Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: (\$2,900.00)\$0.00 735 ILCS 5/12-1001(b) \square Other financial account; checking account 100% of fair market for business with Chase (approximate value, up to any amount; it went negative and Chase closed applicable statutory the account limit Line from Schedule A/B: 17.7 Brief description: (\$650.00)\$0.00 735 ILCS 5/12-1001(b) \square **Checking account through Chase** 100% of fair market value, up to any Line from Schedule A/B: 17.3 applicable statutory limit Brief description: \$660.32 \$660.32 735 ILCS 5/12-1001(b) $\overline{\mathbf{V}}$ Checking account through Bank of 100% of fair market **America** value, up to any Line from Schedule A/B: 17.4 applicable statutory limit

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| F 11 1 2 4 1 2 2 4 | | | | | | |
|---|---|--|--|--|---|-----------------------------------|
| Debtor 1 | Marko First Name | entify your case: Middle Name | Alempic Last Name | | | |
| Debtor 2 (Spouse, if filing) | Marina First Name | Middle Name | Mijatovic Last Name | | | |
| United States Bar | nkruptcy Court for t | he: NORTHERN DI | STRICT OF ILLINO | ols | | |
| Case number (if known) | | | | | Check if this is amended filing | |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors V | Vho Have Clai | ms Secured b | y Property | | 12/15 |
| On the top of any 1. Do any credit □ No. Che □ Yes. Fill | additional pages, ors have claims s | write your name and secured by your proportion this form to the coation below. | case number (if kno | t out, number the entri own). hedules. You have noth | | |
| claim, list the creditor has a | creditor separately particular claim, lis ible, list the claims | ditor has more than or for each claim. If mor at the other creditors in in alphabetical order a | e than one Part 2. As | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | | Describe the page 1 | | \$3,433.89 | \$684.00 | \$2,749.89 |
| PNC Bank Creditor's name P. O. Box 74706 Number Street | 6 | 2006 VW Pas | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Pittsburg City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a community | Debtor 2 only the debtors and ar | Contingen Unliquidate Disputed Nature of lien. An agreem Statutory li Dudgment | t ed Check all that apply nent you made (such a ien (such as tax lien, a lien from a lawsuit uding a right to offset | as mortgage or secured mechanic's lien) | car loan) | |
| Date debt was inc | urred <u>8/2012</u> | Last 4 digits o | of account number | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,433.89

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | | • | Case number (if known) | | | | |
|--|--|------------------------|--|--|---|-----------------------------------|--|
| Part 1: | Additional Page Part 1: Additional Page After listing any entries on this sequentially from the previous | | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | |
| VW Credit Creditor's nam P. O. Box Number St | ne | | Describe the property that secures the claim: Leased 2014 VW Passat | \$12,864.75 | \$8,181.00 | \$4,683.75 | |
| Debtor Debtor Debtor Debtor At least Check | State the debt? Che 1 only 2 only 1 and Debtor 2 | only otors and another | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Purchase Money | mortgage or secured | car loan) | | |
| Date debt v | was incurred | 9/2014 | Last 4 digits of account number | | | | |
| Claim amo | ount is the pa | ayoff balance a | t the end of the lease. | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$12,864.75

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$16,298.64

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| Fill in this inf | ormation to i | dontify your o | | | | |
|--|--|--|---|---|--|---------------------------------------|
| | ormation to id | dentify your c | | | | |
| Debtor 1 | Marko First Name | Middle Name | Alempic Last Name | | | |
| Debtor 2 | Marina | | Mijatovic | | | |
| (Spouse, if filing) | | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for | the: NORTHER | RN DISTRICT OF ILLINOIS | | | |
| Case number (if known) | | | | Г | Check if this i | |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Creditor | s Who Have | e Unsecured Claims | | | 12/15 |
| on Schedule A/B: Do not include any If more space is n to this page. On t | Property (Officially creditors with peeded, copy the top of any additionally and the top of any additionally are top of a addition | al Form 106A/B) a partially secured Part you need, fi ditional pages, w | racts or unexpired leases that coul and on Schedule G: Executory Could claims that are listed in Schedule ill it out, number the entries in the write your name and case number (secured Claims | ntracts and Unexpir D: Creditors Who I boxes on the left. I | ed Leases (Offic Hold Claims Sec | cial Form 106G). ured by Property. |
| | tors have priority | | | | | |
| claim. For ear show both pric more space is | ur priority unsect ch claim listed, ide prity and nonpriori | entify what type o ty amounts. As n ty unsecured clair | creditor has more than one priority u f claim it is. If a claim has both priori nuch as possible, list the claims in al ms, fill out the Continuation Page of I | ty and nonpriority an chabetical order acc | nounts, list that coording to the cred | aim here and ditor's name. If |
| (For an explar | nation of each type | e of claim, see the | e instructions for this form in the instr | ruction booklet. | | |
| (i oi aii oxpiai | idion of edon typ | e or olaim, occ in | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | | | |
| | | | - Last 4 digits of account number | | | |
| Priority Creditor's Nam | ie | | When was the debt incurred? | | | |
| Number Street | | | When was the dest mounted. | | _ | |
| | | | As of the date you file, the claim Contingent | is: Check all that ap | ply. | |
| | | | Unliquidated | | | |
| City | State | ZIP Code | Disputed | | | |
| Who incurred the | debt? Check of | one. | Type of PRIORITY unsecured cla | im: | | |
| Debtor 1 only Debtor 2 only | | | Domestic support obligations | | | |
| Debtor 1 and D | Debtor 2 only | | Taxes and certain other debts to Claims for death or personal in | • | nent | |
| ш | the debtors and a | | intoxicated | ,, | | |
| ш. | claim is for a con | nmunity debt | Other. Specify | | | |
| Is the claim subjed No | Ct to offset? | | | | | |
| Yes | | | | | | |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | Case number (if known) |
|--|---|--|
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims |
| ☐ No ☑ Ye 4. List all If a cree type of | of your nonpriority unsecured claims ditor has more than one nonpriority unsec claim it is. Do not list claims already incl | claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. Total claim |
| Nonpriority Cre P. O. Box 6 Number Harrisburg City Who incurre Debtor 1 Debtor 2 Debtor 1 At least Check i | PA | S5,612.04 Last 4 digits of account number When was the debt incurred? 4/2008 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify |
| American Nonpriority Cre P. O. Box 6 Number Harrisburg City Who incurre Debtor 1 Debtor 2 Debtor 1 At least Check it Is the claim Yes | ## PA 17106-1047 State ZIP Code Check one. Only | \$2,252.46 Last 4 digits of account number 4 9 6 6 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | Case number (if known) | |
|----------------------------|--|--|-------------|
| Dort 2 | Vous NONDRIORITY Uncome | <u> </u> | |
| Part 2: | Tour NONPRIORITY Onsecu | red Claims Continuation Page | |
| After listin previous p | g any entries on this page, number the page. | m sequentially from the | Total claim |
| 4.3 | | | \$6,639.62 |
| L | Express | Last 4 digits of account number 1 0 0 3 | Ψ0,039.02 |
| | reditor's Name | When was the debt incurred? | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| Los Ange | eles, CA 90096-800 | _ | |
| | | ☐ Unliquidated ☐ Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| | red the debt? Check one. | ☐ Student loans | |
| ☐ Debtor Debtor | • | Obligations arising out of a separation agreement or divorce | |
| ☑ Debtor | 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| ш | t one of the debtors and another | Other. Specify | |
| | if this claim is for a community debt n subject to offset? | Credit Card | |
| ✓ No | cubject to enect. | | |
| Yes | | | |
| Business | account | | |
| 4.4 | | | \$833.19 |
| American | reditor's Name | Last 4 digits of account number1006_ | |
| Box 0001 | | When was the debt incurred? | |
| Number Los Ange | Street eles, CA 90096-800 | As of the date you file, the claim is: Check all that apply. □ Contingent | |
| | , | ☑ Unliquidated | |
| | | Disputed | |
| City Who incur | State ZIP Code red the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor | | Student loans Obligations arising out of a separation agreement or divorce | |
| Debtor | • | that you did not report as priority claims | |
| ك | 1 and Debtor 2 only tone of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ш. | if this claim is for a community debt | | |
| _ | n subject to offset? | | |
| ✓ No | | | |
| ☐ Yes | | | |

Business account

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.5 | | \$51.66 |
| Arturo D Tomas, MD | Last 4 digits of account number 8 4 1 3 | |
| Nonpriority Creditor's Name 1100 E Norris Drive | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated | |
| Ottawa IL 61350 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services | |
| Is the claim subject to offset? No Yes | | |
| 4.6 | | \$2,529.20 |
| Best Buy Credit Card | Last 4 digits of account number1785_ | |
| Nonpriority Creditor's Name Citi | When was the debt incurred? | |
| Number Street P. O. Box 78009 | As of the date you file, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated | |
| | — ☐ Disputed | |
| Phoenix AZ 85062-8009 City State ZIP Code | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | ✓ Other. Specify | |
| Is the claim subject to offset? | Credit Card | |
| ✓ No Yes | | |
| 4.7 | | \$3,125.52 |
| Cabelas | Last 4 digits of account number 7 1 1 3 | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| P. O. Box 82575 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ContingentUnliquidated | |
| Lincoln NE 68501 | ─ □ Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | ✓ Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? ✓ No ✓ Yes | | |

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| After listing any entries on this page, number them sequentially from the previous page. 4.8 Capital One Noncomprovious page. Last 4 digits of account number 1 4 1 4 1 4 Noncomprovious page. Last 4 digits of account number 1 4 1 4 1 4 Noncomprovious page. Last 4 digits of account number 1 4 1 4 1 4 Noncomprovious page. Last 4 digits of account number 1 4 1 4 1 4 Noncomprovious page. Last 4 digits of account number 1 4 1 4 1 4 Noncomprovious page. Last 4 digits of account number 1 4 1 4 1 4 Noncomprovious page. Last 4 digits of account number 2 1 4 1 4 Noncomprovious page. Last 4 digits of account number 2 1 4 1 4 Noncomprovious page. Last 4 digits of account number 2 Noncomprovious page. Last 4 digits of account number 3 1 4 1 4 Noncomprovious page. Last 4 digits of account number 2 Noncomprovious page. Last 4 digits of account number 3 1 4 1 4 Noncomprovious page. Last 4 digits of account number 3 1 4 1 4 Noncomprovious page. Last 4 digits of account number 3 1 4 1 4 Noncomprovious page. Last 4 digits of account number 4 1 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number 4 5 0 0 Noncomprovious page. Last 4 digits of account number | Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | Coop number (if known) | |
|--|----------------------|---------------------------------------|--|-------------|
| After listing any entries on this page, number them sequentially from the previous page. 4.8 \$1,928.31 Sapital One | | , | · , | |
| A.8 Capital One | Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| Capital One Nonpriority Creditor's Name Attr: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State 2 P Code When was the debt incurred? At digits of account number 1 4 5 0 0 When was the debt incurred? Salt Lake City UT 84130-0287 City Check if this claim is for a community debt is the claim Stora of the debtors and another Contingent Cont | | | em sequentially from the Total | claim |
| Last 4 digits of account number | 4.8 | | \$: | 1.928.31 |
| Non-priority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 | Capital O | ne | | .,0_0.0. |
| Number Street S | Nonpriority C | Creditor's Name | | |
| Contingent Con | | • | As of the date you file, the claim is: Check all that apply. | |
| Disputed Type of NONPRIORITY unsecured claim: Type | | | <u> </u> | |
| Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Non Nonpriorly Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City UT 84130-0 | | | | |
| Type of NONPRIORITY unsecured claim: Type of NONPRIOR | Salt Lake | City UT 84130-0287 | Disputed | |
| Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 only | | | ☐ Student loans | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Business account 4.9 Capital One Nonpriority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 conty Debtor 3 conty Debtor 4 claim subject to offset? No Debtor 4 claim subject to offset? No Debtor 5 conty Debtor 6 check if this claim is for a community debt is the claim subject to offset? No No No No No No Debtor 6 check if this claim is for a community debt is the claim subject to offset? No | _ | | | |
| At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Ves No Yes Business account 4.9 Last 4 digits of account number 4 5 0 0 Monopriority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 find better Check if this claim is for a community debt Is the claim subject to offset? No Yes No No Yes Yes No Yes | 브 | | | |
| Credit Card Is the claim subject to offset? No Yes Business account 4.9 Capital One Nonpriority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Credit Card Salt Lake City | | st one of the debtors and another | | |
| No | ☐ Check | if this claim is for a community debt | | |
| Business account 4.9 Capital One Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes \$847.82 \$\$44 digits of account number 4 5 0 0 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | Is the clair | m subject to offset? | | |
| Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Ass 4 digits of account number | <u>.</u> | | | |
| Capital One | _ | | | |
| Capital One Nonpriority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and subject to offset? No Yes Last 4 digits of account number 4 5 0 0 When was the debt incurred? As of the date you file, the claim is: Check all that apply. One date you file, the claim is: Check all that apply. Toeld at least one of the debt one. Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card | Business | account | | |
| Nonpriority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Unliquidated Disputed Type of NONPRIORITY unsecured claim: | 4.9 | | | \$847.82 |
| Nonpriority Creditor's Name Attn: General Correspondence Number Street P. O. Box 30285 Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | Capital O | ne | Last 4 digits of account number 4 5 0 0 | |
| As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | | |
| Salt Lake City UT 84130-0287 City State ZIP Code Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Unliquidated Disputed Unliquidated Disputed Unliquidated Disputed Unliquidated Disputed Unliquidated Disputed Unliquidated Disputed Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Credit Card Other Specify C | | | As of the date you file, the claim is: Check all that apply. | |
| Salt Lake City UT 84130-0287 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | P.O. Box | 30285 | Contingent | |
| Salt Lake City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | | | |
| Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Yes Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify Credit Card | Salt Lake | City UT 84130-0287 | ☐ Disputed | |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Yes □ Yes □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Credit Card □ Credit Card | , | | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Congations ansing out of a separation agreement of divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | | lacksquare | |
| ✓ Debtor 1 and Debtor 2 only ✓ At least one of the debtors and another ✓ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ✓ Yes Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | ш | • | | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes | | 1 and Debtor 2 only | | |
| Is the claim subject to offset? ☑ No ☐ Yes | At leas | st one of the debtors and another | 트 블 중요 그 중요 # # # # # # # # # # # # # # # # # # | |
| ✓ No Yes | ☐ Check | if this claim is for a community debt | | |
| ☐ Yes | | m subject to offset? | | |
| — | ₩ | | | |
| | _ | saccount | | |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | Case number (if known) | |
|--------------------------|---|---|-------------|
| | | · · · · · · · · · · · · · · · · · · · | |
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing previous p | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.10 | | | \$3,977.09 |
| Capital O | | Last 4 digits of account number 8 9 5 1 | • |
| P. O. Box | Creditor's Name | When was the debt incurred? | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent ✓ Unliquidated | |
| | | ☐ Disputed | |
| Carol Str City | eam IL 60197 State ZIP Code | _ | |
| - | red the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | |
| ш | 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| | r 2 only r 1 and Debtor 2 only | that you did not report as priority claims | |
| سنا | st one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| _ | if this claim is for a community debt | | |
| | m subject to offset? | | |
| ☑ No | • | | |
| Yes | | | |
| 4.11 | | | \$11,059.16 |
| Capital O | ne Bank | Last 4 digits of account number 7 6 6 5 | Ψ11,033.10 |
| Nonpriority C | Creditor's Name | When was the debt incurred? | |
| P. O. Box Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | eam, IL60197-6492 | _ ☐ Contingent | |
| | | ☑ Unliquidated | |
| | | Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| | red the debt? Check one. r 1 only | Student loans | |
| ш | r 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| <u>ت</u> | 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| <u> </u> | st one of the debtors and another | ☑ Other. Specify | |
| _ | if this claim is for a community debt | Credit Card | |
| — | m subject to offset? | | |
| ✓ No ☐ Yes | | | |
| - . | s account | | |

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | Case number (if known) | |
|--|--|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.12 | | \$5,885.95 |
| Chase | Last 4 digits of account number 6 3 2 4 | |
| Nonpriority Creditor's Name Cardmember Services | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| P. O. Box 1423 | _ ☐ Contingent ☐ Unliquidated | |
| | ☐ Unliquidated Disputed | |
| Charlotte NC 28201-1423 City State ZIP Code | - The set NONDRIGHTY was a sound below | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| Yes | | |
| 4.13 | | \$7,047.85 |
| Chase Slate Card | Last 4 digits of account number 9 9 1 0 | |
| Nonpriority Creditor's Name P. O. Box 1423 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ | |
| | Disputed | |
| Charlotte NC 28201-1423 City State ZIP Code | Type of NONDRIORITY unaccured eleims | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| | | |
| 4.14 | | \$49,420.85 |
| Chase Business Credit Line | _ Last 4 digits of account number1002_ | |
| Nonpriority Creditor's Name Chase | When was the debt incurred? 2016 | |
| Number Street P. O. Box 9001022 | As of the date you file, the claim is: Check all that apply. | |
| F. O. BOX 9001022 | _ | |
| Louisville KY 40290-1022 | Disputed | |
| Louisville KY 40290-1022 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | Case number (if known) | |
|----------------------|--|---|-------------------|
| | | Case Humber (it known) | |
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| previous p | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.15 | | | \$4,828.22 |
| Chase Ca | ard Creditor's Name | Last 4 digits of account number 8 0 9 9 | |
| P. O. Box | 15298 | When was the debt incurred? | |
| Number | Street | As of the date you file, the claim is: Check all that apply. — — Contingent | |
| | | ☑ Unliquidated | |
| Wilmingt | on DE 19850 | Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| | red the debt? Check one. | ☐ Student loans | |
| ш | ² 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| <u> </u> | 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| <u> </u> | st one of the debtors and another | Other. Specify | |
| _ | if this claim is for a community debt meaning subject to offset? | Credit Card | |
| ✓ No | in subject to onset? | | |
| Yes | | | |
| 4.16 | | | \$0.005.04 |
| Chase In | · | Last 4 digits of account number 4 1 9 3 | \$2,385.01 |
| | Creditor's Name | Last 4 digits of account number4193_ When was the debt incurred? | |
| P. O. Box Number | 1423 Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | | Unliquidated | |
| Charlotte | | Disputed | |
| City Who incur | State ZIP Code red the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | 1 only | Student loans Obligations origing out of a congretion agreement or diverse | |
| Debtor | 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| <u>ت</u> | r 1 and Debtor 2 only st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| _ | if this claim is for a community debt | | |
| _ | m subject to offset? | Credit Card | |
| ✓ No | • | | |
| Yes | | | |
| Business | account | | |

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| Debtor 1 | Marko Alempic | | |
|---|--|--|-------------|
| Debtor 2 | Marina Mijatovic | Case number (if known) | |
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | g any entries on this page, number the page. | m sequentially from the | Total claim |
| 4.17 | | | \$19,855.96 |
| Chase Inl | K Creditor's Name | Last 4 digits of account number0578_ When was the debt incurred? | |
| Number P. O. Box | nber Services Street 1423 | As of the date you file, the claim is: Check all that apply. Contingent | |
| Charlotte | NC 28201-1423 | ✓ Unliquidated Disputed | |
| Debtor Debtor Debtor Debtor At leas Check | 2 only 1 and Debtor 2 only st one of the debtors and another if this claim is for a community debt | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | |
| ✓ No ☐ Yes | n subject to offset? | | |
| 4.18 | s expense | | \$5,462.82 |
| | apphire Card Creditor's Name 15298 Street | Last 4 digits of account number 4 0 6 6 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | |
| Wilmingto | | ✓ Unliquidated — Disputed — | |
| Debtor Debtor Debtor Debtor At leas Check | • | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | |

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | | | | | |
|--|---|-------------|--|--|--|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | | | | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim | | | |
| 4.19 | | \$2,124.80 | | | |
| Chase Slate Card | Last 4 digits of account number 0 4 8 2 | | | | |
| Nonpriority Creditor's Name P. O. Box 15298 | When was the debt incurred? | | | | |
| Number Street | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | | |
| Wilmington DE 19850 | Disputed | | | | |
| City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | | | |
| 4.20 | | \$2,502.88 | | | |
| Citibank | Last 4 digits of account number 3 0 6 8 | | | | |
| Nonpriority Creditor's Name P. O. Box 183037 | When was the debt incurred? | | | | |
| Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | _ Contingent | | | | |
| | Unliquidated | | | | |
| Columbus OH 43218-3051 | ─ | | | | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | | | | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | | | | |
| └ ¬ , , | Obligations arising out of a separation agreement or divorce | | | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | | | | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | | | | |
| Check if this claim is for a community debt | Credit Card | | | | |
| Is the claim subject to offset? | | | | | |
| ✓ No Yes | | | | | |
| 4.21 | | \$8,825.94 | | | |
| Citibank/Choice | Last 4 digits of account number 2 3 7 5 | Ψο,οΣοιο- | | | |
| Nonpriority Creditor's Name | When was the debt incurred? | | | | |
| P. O. Box 183037 | | | | | |
| Number Street | As of the date you file, the claim is: Check all that apply. □ Contingent | | | | |
| | ☐ Goritingent ☐ Unliquidated | | | | |
| Columbus 011 42040 2054 | Disputed | | | | |
| Columbus OH 43218-3051 City State ZIP Code | Type of NONDDIODITY uncocured claims | | | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | | | | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | | | | |
| Debtor 2 only | that you did not report as priority claims | | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| — | Other. Specify | | | | |
| Check if this claim is for a community debt | Credit Card | | | | |
| Is the claim subject to offset? ✓ No ☐ Yes | | | | | |

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.22 | | \$8,825.94 |
| Direct Loans | Last 4 digits of account number 0 7 2 2 | |
| Nonpriority Creditor's Name U S Department of Education | When was the debt incurred? 8/2008 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| P. O. Box 105193 | _ | |
| Atl 4 00 00 00 5400 | Disputed | |
| Atlanta GA 30348-5193 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| | | |
| 4.23 | | \$4,228.83 |
| Discover Financial Services Nonpriority Creditor's Name | Last 4 digits of account number9 _ 9 _ 3 _ 5 _ | |
| P. O. Box 6103 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. — Contingent | |
| | ☐ Unliquidated | |
| Carol Stream IL 60197-6103 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ✓ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? ✓ No | | |
| Yes | | |
| 4.24 | | • |
| | Local Adjuste of account number 0 0 4 4 | \$1,137.41 |
| IL. Designated Account Purchase Program Nonpriority Creditor's Name | Last 4 digits of account number9014_ When was the debt incurred? 11/2006 | |
| P. O. Box 105193 Number Street | When was the debt incurred? 11/2006 As of the date you file, the claim is: Check all that apply. | |
| Atlanta, GA30348 | _ ☐ Contingent | |
| | Unliquidated | |
| | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations arising out of a congration agreement or diverse | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another Check if this claim is for a community debt | Other. Specify | |
| Check if this claim is for a community debt Is the claim subject to offset? | | |
| No | | |
| Yes | | |

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | Case number (if known) | |
|--|---|------------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.25 | | \$5,301.43 |
| Macy's Credit & Customer Service | Last 4 digits of account number 8 0 5 4 | |
| Nonpriority Creditor's Name P. O. Box 8113 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated | |
| Mason OH 45040 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| ☐ Check if this claim is for a community debt | Store account | |
| Is the claim subject to offset? No Yes | | |
| 4.26 | | \$10,398.21 |
| Prosper Funding LLC | Last 4 digits of account number 3 4 5 1 | |
| Nonpriority Creditor's Name 221 Main Street, Ste 300 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| San Francisco CA 94105 | — Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | ☐ Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Personal loan | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| Yes | | |
| 4.27 | | 67 044 00 |
| | Last 4 digits of account number 1 2 4 7 | \$7,341.33 |
| Prosper Funding, LLC Nonpriority Creditor's Name | | |
| 221 Mian Street, Ste 300 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | |
| | Disputed | |
| San Francisco CA 94105 City State ZIP Code | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Personal loan | |
| Is the claim subject to offset? ✓ No ☐ Yes | | |

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| Debtor 1 Debtor 2 | Marko Alem Marina Mija | • | | Case number (if known) | |
|---|--|----------|------------------|---|------------------------|
| Part 2: | Your NO | NPRIO | RITY Unsecur | ed Claims Continuation Page | |
| After listing previous pa | • | n this p | age, number ther | n sequentially from the | Total claim \$2,333.85 |
| St. Elizabeth Medical Center Nonpriority Creditor's Name Afni, Inc Number Street P. O. Box 3517 | | | | Last 4 digits of account number 1 0 1 5 When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated | |
| Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 Debtor 3 Debtor 4 Debtor 3 Debtor 3 | ed the debt? I only only only I and Debtor 2 one of the debt | tors and | | | |

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| Debtor 1 | Marko Alempic | |
|----------|------------------|------------------------|
| Debtor 2 | Marina Mijatovic | Case number (if known) |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|-----------------------------|-----|---|-------------------------------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. \$0.00 |
| nom runt r | 6b. | Taxes and certain other debts you owe the government | 6b. \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. + \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. \$0.00 |
| | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. \$20,953.37 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | ^{6i.} +\$165,809.98 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. \$186,763.35 |

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| Fill in this inf | ormation to ide | | | | | | |
|---|-----------------|-------------|-----------|--|---------------------|--|--|
| Debtor 1 | Marko | | Alempic | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Marina | | Mijatovic | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | | | |
| Case number | | | | | Check if this is an | | |
| (if known) | | | | | amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill in this information to identify your case: | | | | | |
|---|--|--|---|---|--|
| Debtor 1 | | Marko | | Alempic | |
| | | First Name | Middle Name | Last Name | |
| Debtor 2 | | Marina First Name | Middle Name | Mijatovic Last Name | |
| | | | | | |
| United S | States Ban | kruptcy Court for the | e: NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number (if known) | | | | | ☐ Check if this is an |
| (| •, | | | | amended filing |
| Official | LCorm | 10611 | | | |
| Official | | | | | |
| Sched | ule H: | Your Codeb | tors | | 12/15 |
| page. On 1. Do y ☑ 2. With inclu ☑ 3. In Copers cred | ou have a No Yes in the las de Arizona No. Go to Yes. Did No Yes Dlumn 1, I on showr | of any Additional Parany codebtors? (Interpretation of the Section 1) of the Section of the Sect | lived in a communit Louisiana, Nevada, Nospouse, or legal equal btors. Do not include a codebtor only if the Form 106D), Schedu | case, do not list either spous cy property state or territory lew Mexico, Puerto Rico, Tex ivalent live with you at the tin le your spouse as a codebt at person is a guarantor or the E/F (Official Form 106E/ | ? (Community property states and territories as, Washington, and Wisconsin.) |
| | | Schedule E/F, or Sc Your codebtor | nedule G to fill out | Soluliii 2. | Column 2: The creditor to whom you owe the debt |
| O | olullii 1. | Tour Codebior | | | · |
| | | | | | Check all schedules that apply: |
| | admila I ame | Mijatovic | | | Schedule D, line |
| N | umber | Street | | | Schedule E/F, line 4.1 |
| _ | annoci | | | | Schedule G, line |
| | | | | | American Education Services |
| <u></u> | itv | | State | ZIP Code | |

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| | | | unicht | . age | , 57 (| | | | |
|--|--------------|-----------------------|--------------------|---------------------|-----------|----------------|-----------------------------------|--------|----------|
| Fill in this inform | nation to | identify your case: | | | | | | | |
| Debtor 1 | Marko | | | lempic | | | | | |
| | First Name | Middle Name | La | ast Name | | Ch | eck if this is: | | |
| Debtor 2 | Marina | NO. I II. NI | | lijatovic | | — ⊓ | An amended filing | | |
| (Spouse, if filing) | First Name | Middle Name | | ast Name | | | A supplement showing p | netnat | ition |
| United States Bank | ruptcy Court | for the: NORTHERN | DISTRIC | T OF ILLIN | OIS | □ | chapter 13 income as of | • | |
| Case number (if known) | | | | | | | | _ | J |
| , | | | | | | | MM / DD / YYYY | _ | |
| Official Form 10 | <u> </u> | | | | | | | | |
| Schedule I: Yo | ur Inco | me | | | | | | | 12/1 |
| your name and case r | ibe Emplo | nown). Answer every o | | eet to this it | Jiii. Oi | Title top of | f any additional pages, w | nie | |
| Fill in your emploinformation. | oyment | | Dahtar | 4 | | | Dahtar 2 ar nan filing | | |
| If you have more t | than one | | <u>Debtor</u> | 1 | | | Debtor 2 or non-filing | spou | se |
| job, attach a sepa | | Employment status | | ployed | | | ✓ Employed | | |
| with information al additional employe | | | _ | t employed | | | ■ Not employed | | |
| | | Occupation | Truck [| <u> Driver</u> | | | Insurance Represe | ntativ | <u>e</u> |
| Include part-time, or self-employed v | | Employer's name | Goran | Express In | С | | Tak Trucking, Inc | | |
| Occupation may in | nclude | Empleyede eddrese | 620 684 | h Ctroot | | | 2510 E Dovon | | |
| student or homem | | Employer's address | Number | th Street Street | | | 2510 E Devon Number Street | | |
| applies. | | | | | | | | | |
| | | | Willowl | brook | IL | 60527 | Elk Grove Villa | IL | 60007 |
| | | | City | | State | Zip Code | City | State | Zip Code |
| | | How long employed t | here? | 6 months | | _ | 1.5 months | | _ |
| David O. Ohra F | N-4-!!- Al- | and Mandala Inc. | _ | | | | | | |
| | | out Monthly Incom | | | | | | | |
| Estimate monthly inco non-filing spouse unles | | _ | n. If you h | ave nothing | to repor | t tor any line | e, write \$0 in the space. In | clude | your |
| If you or your non-filing | spouse hav | • | er, combin | e the informa | ation for | all employe | ers for that person on the li | nes be | elow. If |
| | | | | | For D | Debtor 1 | For Debtor 2 or non-filing spouse | | |

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. **\$2,500.00 \$1,950.00**

would be.

3. Estimate and list monthly overtime pay.

3. **+ \$0.00**

4. Calculate gross income. Add line 2 + line 3.

4. \$2,500.00

\$0.00

Official Form 106l Schedule I: Your Income

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| | btor 1 Marko Alempic btor 2 Marina Mijatovic | | Case nu | ımber (if known) | |
|-----|--|----------------|----------------------|-----------------------------------|------------------------------------|
| | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| | Copy line 4 here | 4. | \$2,500.00 | \$1,950.00 | |
| 5. | List all payroll deductions: | _ | 00.00 | ¢274.22 | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | <u>\$274.22</u> | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 \$0.00 | \$0.00 \$0.00 | |
| | 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans | 5c. 5d. | \$0.00 | \$0.00 | |
| | 5e. Insurance | 5u. 5e. | \$0.00 | \$0.00 | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | \$0.00 | |
| | 5g. Union dues | 5g. | \$0.00 | \$0.00 | |
| | 5h. Other deductions. | -3 | | | |
| | Specify: | _ 5h. - | - \$0.00 | \$0.00 | |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | 6. | \$0.00 | \$274.22 | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$2,500.00 | <u>\$1,675.78</u> | |
| 8. | List all other income regularly received: | | | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm | 8a. | \$310.63 | \$0.00 | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | \$0.00 | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | \$0.00 | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | \$0.00 | |
| | 8e. Social Security | 8e. | \$0.00 | \$0.00 | |
| | 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | 0,4 | *** | * 0.00 | |
| | Specify: | 8f. | \$0.00 | \$0.00 | |
| | 8g. Pension or retirement income | 8g. | \$0.00 | \$0.00 | |
| | 8h. Other monthly income. Specify: | 8h. | \$0.00 | \$0.00 | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$310.63 | \$0.00 | |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$2,810.63 | + \$1,675.78 | \$4,486.41 |
| 11. | State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your houselfriends or relatives. | | | ur roommates, and othe | :r |
| | Do not include any amounts already included in lines 2-10 or amounts that | nt are r | not available to pay | expenses listed in Sche | edule J. |
| | Specify: | | | 11. 👍 | \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. income. Write that amount on the Summary of Your Assets and Liabilities if it applies. | | | | \$4,486.41 Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after you file t | his fo | rm? | | , |
| | ✓ No. None. | | | | |
| | Yes. Explain: | | | | |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | Case number (if known) | |
|----------------------|---|---|------------|
| 8a. Attac | hed Statement (Debtor 1) | | |
| | Truck Driver | | |
| FINANCIA | AL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE inform | mation directly related to the business ope | eration.) |
| PART A - | GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS: | | |
| 1. G | ross Income for 12 Months Prior to Filing: | \$90,590.18 | |
| PART B - | ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: | | |
| 2. G | ross Monthly Income: | | \$2,500.00 |
| PART C - | ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: | | |
| 3. Ne | et Employee Payroll (Other Than Debtor): | \$1,000.00 | |
| 4. Pa | ayroll Taxes: | \$193.87 | |
| 5. Uı | nemployment Taxes: | \$5.50 | |
| 6. W | orker's Compensation: | \$0.00 | |
| 7. O | ther Taxes: | \$0.00 | |
| 8. In | ventory Purchases (including raw materials): | \$50.00 | |
| 9. Pı | urchase of Feed/Fertilizer/Seed/Spray: | \$0.00 | |
| 10. F | Rent (other than debtor's principal residence): | \$0.00 | |
| 11. l | Jtilities: | \$0.00 | |
| 12. 0 | Office Expenses and Supplies: | \$0.00 | |
| 13. F | Repairs and Maintenance: | \$0.00 | |
| 14. \ | /ehicle Expenses: | \$200.00 | |
| 15. 7 | Fravel and Entertainment: | \$500.00 | |
| 16. E | Equipment Rental and Leases: | \$0.00 | |
| 17. L | Legal/Accounting/Other Professional Fees: | \$180.00 | |
| 18. I | nsurance: | \$60.00 | |
| 19. E | Employee Benefits (e.g., pension, medical, etc.): | \$0.00 | |
| 20. F | Payments to be Made Directly by Debtor to Secured Creditors for | | |
| I | Pre-Petition Business Debts (Specify): | None | |
| 21. (| Other (Specify): | None | |
| 22. 1 | Total Monthly Expenses (Add items 3 - 21) | | \$2,189.37 |
| PART D - | ESTIMATED AVERAGE NET MONTHLY INCOME: | | |
| 23. <i>A</i> | AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2): | | \$310.63 |

Official Form 106l Schedule I: Your Income page 3

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| F | ill in this inform | ation to ider | ntify your case: | | | Cha | als if this | · | |
|----------|---|---------------------------------------|---|--------------------------|---|---------|-------------|------------------------------|--|
| | Debtor 1 | Marko First Name | Middle Name | Alem Last Na | | | | nded filing ement showing | nostnatition |
| | Debtor 2 (Spouse, if filing) | Marina First Name | Middle Name | Mijato Last Na | | | | 13 expenses as | |
| | United States Bankr | uptcy Court for the | he: NORTHERN | I DISTRICT O | FILLINOIS | | MM / DE |) / YYYY | _ |
| | Case number (if known) | | | | | | | | |
| 0 | fficial Form 10 | <u>6J</u> | | | | | | | |
| S | chedule J: Yo | ur Expens | ses | | | | | | 12/15 |
| co na | rrect information. If me and case numbe | more space is | needed, attach an nswer every ques | other sheet to t | ing together, both ar his form. On the top | | | | |
| 1. | Is this a joint case | e? | | | | | | | |
| 2. | _ ✓ No | ebtor 2 live in a | a separate househousehousehousehousehousehousehouse | | s for Separate Housel | nold of | Debtor 2 | . | |
| | Do not list Debtor 1 Debtor 2. | 1 and | Yes. Fill out thi | s information dent | Dependent's relation Debtor 1 or Debtor | | | Dependent's age | Does dependent live with you? |
| | Do not state the de names. | ependents' | | | | | | 2 | Yes No Yes No Yes No Yes No Yes No Yes No No Yes No No |
| 3. | Do your expenses expenses of peop yourself and your | le other than | ☑ No □ Yes | | | | | | Yes Yes |
| F | Part 2: Estima | nte Your Ona | oing Monthly E | Expenses | | | | | |
| to | timate your expense | es as of your ba of a date after t | ankruptcy filing da the bankruptcy is t | te unless you a | re using this form as supplemental Sche | - | - | - | |
| | clude expenses paid ch assistance and h | | • | • | | | | Your expens | es |
| 4. | | | kpenses for your r | | | | 4 | · | |
| | If not included in | line 4: | | | | | | | |
| | 4a. Real estate ta | ixes | | | | | 4 | a | |
| | 4b. Property, hom | neowner's, or ren | nter's insurance | | | | 4 | b | |
| | 4c. Home mainte | nance, repair, ar | nd upkeep expense | s | | | 4 | c | |
| | 4d Homeowner's | association or o | condominium dues | | | | 4 | d | \$285.00 |

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| Debtoi Debtoi | | Case number (if known) | |
|------------------|--|------------------------|------------|
| | | Your expense | es |
| 5. A | Additional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. U | Itilities: | | |
| 6 | a. Electricity, heat, natural gas | 6a. | \$100.00 |
| 6 | b. Water, sewer, garbage collection | 6b | \$50.00 |
| 6 | c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$400.00 |
| 6 | d. Other. Specify: | 6d. | \$100.00 |
| | ood and housekeeping supplies | 7. | \$2,000.00 |
| 8. C | Childcare and children's education costs | 8. | \$600.00 |
| 9. C | Clothing, laundry, and dry cleaning | 9. | \$500.00 |
| 10. P | Personal care products and services | 10. | \$400.00 |
| 11. N | ledical and dental expenses | 11. | |
| | ransportation. Include gas, maintenance, bus or train are. Do not include car payments. | 12. | \$250.00 |
| | Intertainment, clubs, recreation, newspapers, nagazines, and books | 13. | \$100.00 |
| 14. C | charitable contributions and religious donations | 14. | |
| _ | nsurance. On not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 1: | 5a. Life insurance | 15a. | |
| 1: | 5b. Health insurance | 15b. | |
| 1 | 5c. Vehicle insurance | 15c. | \$130.00 |
| 1 | 5d. Other insurance. Specify: | 15d. | |
| 16. T | axes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| | Specify: | 16. | |
| 17. Ir | nstallment or lease payments: | | |
| 1 | 7a. Car payments for Vehicle 1 Vehicle | 17a | |
| 1 | 7b. Car payments for Vehicle 2 Vehicle | 17b | \$301.59 |
| | 7c. Other. Specify: | | |
| 1 | 7d. Other. Specify: | 17d | |
| | our payments of alimony, maintenance, and support that you did not report as leducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| | Other payments you make to support others who do not live with you. | 19. | |

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| Debtor 1 Debtor 2 | | Marko Alempic Marina Mijatovic | Case number (if known) | | | |
|----------------------|-------|---|------------------------|------------|--|--|
| 20. | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | | | |
| | 20a. | Mortgages on other property | 20a. | | | |
| | 20b. | Real estate taxes | 20b | | | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | | | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | | | |
| | 20e. | Homeowner's association or condominium dues | 20e | | | |
| 21. | Other | Specify: | 21. + | | | |
| 22. | Calcu | alate your monthly expenses. | | | | |
| | 22a. | Add lines 4 through 21. | 22a | \$5,455.84 | | |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | . 22b | | | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$5,455.84 | | |
| 23. | Calcu | late your monthly net income. | | | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$4,486.41 | | |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. – | \$5,455.84 | | |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | (\$969.43) | | |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | u file this form? | | | |
| | | xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortgate. | . , | | | |
| | | No. Yes. Explain here: None. | | | | |

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| Fill in this inf | ormation to | identify your case | : | |
|------------------------|----------------------|--------------------|----------------------|------------------------------------|
| Debtor 1 | Marko | | Alempic | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Marina | | Mijatovic | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| Office Otates Bai | initiapitoy Court it | or the. HORTHERITE | DISTRICT OF ILLINOIS | |
| Case number | | | | ☐ Check if this is an |
| Case number (if known) | | | | Check if this is an amended filing |
| | 106Sum | | | — |

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Р | art 1: Summarize Your Assets | |
|----|--|--------------------------------------|
| | | Your assets Value of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$8,837.99 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$8,837.99 |
| P | art 2: Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$16,298.64 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$186,763.35 |
| | Your total liabilities | \$203,061.99 |
| Р | art 3: Summarize Your Income and Expenses | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$4,486.41 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$5,455.84 |

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| | tor 1 tor 2 | Marko Alempic Marina Mijatovic | Case number (if known) | | | | |
|----|---|---|------------------------|------------|--|--|--|
| P | art 4: | Answer These Questions for Administrative and Statistic | cal Records | | | | |
| 6. | Are yo | ou filing for bankruptcy under Chapters 7, 11, or 13? | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes | | | | | | |
| 7. | What I | kind of debt do you have? | | | | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | |
| 8. | | the Statement of Your Current Monthly Income: Copy your total current mo I Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | onthly income from | \$2,725.00 | | | |
| 9. | Сору | the following special categories of claims from Part 4, line 6 of Schedule | ₽ E/F: | | | | |
| | | | Total claim | | | | |
| | From | Part 4 on Schedule E/F, copy the following: | | | | | |
| | 9a. D | omestic support obligations. (Copy line 6a.) | \$0.0 | <u>0</u> | | | |
| | 9b. T | axes and certain other debts you owe the government. (Copy line 6b.) | \$0.0 | <u>0</u> | | | |

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

\$20,953.37

\$20,953.37

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| | | Doci | ument Page 45 (| of 60 | | | | | |
|---|------------------------|----------------------|--|-----------------------|------------------------------------|-------|--|--|--|
| Fill in this info | ormation to ider | ntify your case: | | | | | | | |
| Debtor 1 | Marko First Name | Middle Name | Alempic Last Name | | | | | | |
| Debtor 2 (Spouse, if filing) | Marina First Name | Middle Name | Mijatovic Last Name | | | | | | |
| United States Bar | nkruptcy Court for the | e: NORTHERN DIS | STRICT OF ILLINOIS | | | | | | |
| Case number (if known) | | | | | Check if this is an amended filing | | | | |
| Official Form | 106Dec | | | | | | | | |
| Declaration | About an Ind | ividual Debto | r's Schedules | | | 12/15 | | | |
| If two married peo | pple are filing togeth | er, both are equally | responsible for supplying | correct information. | | | | | |
| concealing proper | rty, or obtaining mo | ney or property by f | nedules or amended scheduraud in connection with a b B U.S.C. §§ 152, 1341, 1519, | ankruptcy case can re | • | | | | |
| Sig | Sign Below | | | | | | | | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | | |

| Sign Below | |
|--|--|
| Did you pay or agree to pay someone who is NOT a | n attorney to help you fill out bankruptcy forms? |
| ☑ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read t true and correct. | he summary and schedules filed with this declaration and that they are |
| X /s/ Marko Alempic Marko Alempic, Debtor 1 | X /s/ Marina Mijatovic Marina Mijatovic, Debtor 2 |
| Date 09/06/2017 MM / DD / YYYY | Date <u>09/06/2017</u> MM / DD / YYYY |

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| Fil | ll in this inf | ormation to i | dentify your c | ase: | | | | | |
|--------------|-------------------------------|---------------------------------------|---|-------------------|------------------------|-------------------|-------------|----------------|-------------------------------|
| De | btor 1 | Marko First Name | Middle Name | | Alempic Last Name | | | | |
| _ | _ | | Middle Name | | | | | | |
| | btor 2 bouse, if filing) | Marina First Name | Middle Name | | Mijatovic Last Name | | | | |
| Un | ited States Ba | nkruptcy Court fo | r the: NORTHE | RN DIST | RICT OF IL | LINOIS | | | |
| | se number | | | | | _ | | ☐ Check i | f this is an |
| (if | known) | | | | | | | amende | |
| Off | icial Form | 107 | | | | | | | |
| Sta | tement c | of Financial | Affairs for | Indivi | duals Fil | ing for Ban | kruptcy | / | 04/16 |
| corr your | ect information | on. If more spac use number (if ki | e is needed, attanome is needed, attanomn). Answer e | ch a sep | arate sheet to | o this form. On t | he top of a | | |
| 1. | | current marital | | | | | | | |
| 2. | □ No | | you lived anywh | | | | e now. | | |
| | Debtor 1: | | | Dates lived th | Debtor 1 nere | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | | ✓ Same as I | Debtor 1 | | Same as Debtor |
| | 741 Davl | oreak Lane | | From | 12/2014 | | | | From |
| | | Street | | - | 11/2016 | Number Stree | t | | |
| | Carol Str | eam, IL 60188 | | - ' - | 11/2010 | | | | |
| | City | Str | ate ZIP Code | - | | City | | State ZIP Code | _ |
| | Oily | 0 | 211 0000 | | | Oity | | nato Zii oodo | |
| | Debtor 1: | | | Dates lived th | Debtor 1 nere | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | | Same as [| Debtor 1 | | Same as Debtor |
| | Cannon | Drive | | From | 2/2012 | | | | From |
| | | Street | | - <u> —</u> То | 12/2014 | Number Stree | t | | To |
| | Mt. Pros | pect, IL | | - | | _ | | | _ |
| | City | Sta | ate ZIP Code | - | | City | S | State ZIP Code | _ |
| | (Community p Washington, a | property states and Wisconsin.) | ou ever live with d territories include t Schedule H: You | de Arizon | a, California, | Idaho, Louisiana, | | | • |

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| Debtor 1 Marko Alempic Debtor 2 Marina Mijatovic | | | Case nu | mber (if known) | | | |
|--|---|---|--|--|---|--|--|
| P | art 2: | Explain the Sources of Y | our Income | | | | |
| 4. | I. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | |
| | □ No ☑ Yes | s. Fill in the details. | | | | | |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | |
| | | ry 1 of the current year until ı filed for bankruptcy: | Wages, commissions, bonuses, tips☐ Operating a business | - | Wages, commissions, bonuses, tips Operating a business | \$8,810.06 | |
| For the last calendar year: (January 1 to December 31, 2016) YYYY | | • | | | Wages, commissions, bonuses, tips ✓ Operating a business | \$277,549.59 | |
| For the calendar year before that: (January 1 to December 31, 2015) | | • | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | Wages, commissions, bonuses, tips ✓ Operating a business | \$410,324.00 | |
| 5. | | | | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |

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| | | Marko Alempic |
|-----|------------------------------------|--|
| Der | | Marina Mijatovic Case number (if known) |
| P | art 3: | List Certain Payments You Made Before You Filed for Bankruptcy |
| 6. | Are eith | er Debtor 1's or Debtor 2's debts primarily consumer debts? |
| | □ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? |
| | | ☐ No. Go to line 7. |
| | | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| | | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. |
| | ✓ Yes. | Debtor 1 or Debtor 2 or both have primarily consumer debts. |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? |
| | | ✓ No. Go to line 7. |
| | | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| 7. | Insiders corporati agent, in | year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ons of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing cluding one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony. |
| | ✓ No ☐ Yes. | List all payments to an insider. |
| 8. | | year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider? |
| | Include p | payments on debts guaranteed or cosigned by an insider. |
| | ✓ No ☐ Yes. | List all payments that benefited an insider. |
| | | |
| Б | art 4: | Identify Legal Actions, Repossessions, and Foreclosures |
| | | |
| 9. | List all s | year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? uch matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody tions, and contract disputes. |
| | ✓ No ☐ Yes. | Fill in the details. |

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| | otor 1 otor 2 | Marko Alempic Marina Mijatovic | | | Case number (if k | nown) | |
|------------------------|-----------------------------|---|-----------------------|--|--------------------|---|-------------------|
| 10. | seized, | 1 year before you fi or levied? all that apply and fill i | | otcy, was any of your property repossed | essed, foreclosed | d, garnished, attach | ed, |
| | | Go to line 11. S. Fill in the information | ion below. | | | | |
| 11. | | | | uptcy, did any creditor, including a ba make a payment because you owed a | | stitution, set off any | , |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |
| 12. | | | - | etcy, was any of your property in the pustodian, or another official? | ossession of an | assignee for the be | nefit of |
| | ✓ No ☐ Yes | S | | | | | |
| P | art 5: | List Certain G | ifts and Con | tributions | | | |
| 13. | Within | 2 years before you | filed for bankru | ptcy, did you give any gifts with a tota | al value of more t | han \$600 per perso | n? |
| | ✓ No ☐ Yes | s. Fill in the details fo | or each gift. | | | | |
| 14. | | 2 years before you t charity? | filed for bankru | ptcy, did you give any gifts or contrib | utions with a tota | al value of more tha | n \$600 |
| | ✓ No | s. Fill in the details fo | or each gift or co | ontribution. | | | |
| P | art 6: | List Certain L | osses | | | | |
| 15. | | 1 year before you fi isaster, or gamblinຸ | - | etcy or since you filed for bankruptcy, | did you lose any | thing because of th | eft, fire, |
| | ✓ No | s. Fill in the details. | | | | | |
| P | art 7: | List Certain P | ayments or 1 | Transfers | | | |
| 16. | anyone | you consulted abo | out seeking ban | otcy, did you or anyone else acting on kruptcy or preparing a bankruptcy per reparers, or credit counseling agencies f | tition? | | • |
| | □ No ☑ Yes | s. Fill in the details. | | | | | |
| | arles W | m. Dobra, Ltd | | Description and value of any propert Filing fee for Chapter 7 Bankrupt | - | Date payment or transfer was made | Amount of payment |
| 675 E Irving Park Road | | | | 05/24/2017 | \$1,745.00 | | |
| Num Sui | iber Str i te 100 | eet | | | | | |
| | | | | | | | - |
| City | selle | IL State | 60172 ZIP Code | | | | |
| Ema | il or websi | te address | | | | | |
| Pers | on Who M | lade the Payment, if Not | You | | | | |

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| Debtor 1 Debtor 2 | Marko Alempic Marina Mijatovic | : | Case number (if | known) | |
|-------------------------------|-----------------------------------|---------------|--|---|-------------------|
| U S Bank Person Who | kruptcy Court Was Paid | | Description and value of any property transferred Filing fee for Chapter 7 Bankruptcy | Date payment or transfer was made | Amount of payment |
| | | | _ | | \$330.00 |
| Number S | Street | | - - | | |
| City | State | ZIP Code | - | | |
| Email or web | osite address | | - | | |
| Person Who | Made the Payment, if No | You | - | | |
| Springbo Person Who | pard Non-profit Cre | dit Counselin | Description and value of any property transferred For credit counseling and debtor education courses | Date payment or transfer was made | Amount of payment |
| | | | | | \$110.00 |
| Number S | Street | | - | | |
| | | | - | | |
| City | State | ZIP Code | - | | |
| Email or web | osite address | | - | | |
| Person Who | Made the Payment, if No | You | - | | |
| CIN | | | Description and value of any property transferred Copies of tax transcripts from the IRS | Date payment or transfer was | Amount of payment |
| Person Who |) Was Paid | | | made | 605.00 |
| Number S | Street | | - | | \$35.00 |
| | | | - | | |
| City | State | ZIP Code | - | | |
| Email or web | osite address | | - | | |
| Person Who | Made the Payment, if No | You | - | | |
| | | | otcy, did you or anyone else acting on your behalf pay rith your creditors or to make payments to your credit | | perty to |
| | ot include any paymen | | | | |
| ΔN | lo es. Fill in the details. | | | | |

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| Debtor 1 Debtor 2 | | Marko Alempic Marina Mijatovic | | | Case number (if known) | | |
|----------------------|--|---|---------------------------|----------------|--|-----------------------|--|
| 18. | | 2 years before you filed for ba ty transferred in the ordinary | | • | transfer any property to anyone, other s? | than | |
| | | both outright transfers and tran include gifts and transfers that y | - 1 | | security interest or mortgage on your prop | perty). | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |
| 19. | | 10 years before you filed for be a beneficiary? (These are o | | | o a self-settled trust or similar device of | f which | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |
| P | art 8: | List Certain Financial | Accounts, Instruments | , Safe Depo | sit Boxes, and Storage Units | | |
| 20. | | 1 year before you filed for bar , closed, sold, moved, or trans | • • | accounts or in | struments held in your name, or for you | ır | |
| | | checking, savings, money mark, pension funds, cooperatives, a | | - | deposit; shares in banks, credit unions, b | rokerage | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |
| 21. | • | now have, or did you have w urities, cash, or other valuabl | • | for bankruptcy | r, any safe deposit box or other deposite | ory | |
| | ✓ No | s. Fill in the details. | | | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No ✓ Yes. Fill in the details. | | | | | | |
| | | | Who else has or had acces | s to it? | Describe the contents | Do you still have it? | |
| | olic Sto | | Name | | Held house items in storage | ☑ No | |
| | e of Stora ol Strea | ge Facility am, IL | name | | when we moved into my parent's house. November, 2016 to April, | Yes | |
| Number Street | | eet | Number Street | | 2017. | | |
| | | | - | | | | |
| City | | State ZIP Code | City State | ZIP Code | | | |

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| Debtor 1 Debtor 2 | | Marko Alempic Marina Mijatovic | Case number (if known) | | | |
|--|--|---|---|--|--|--|
| Part 9: Identify Property You Hold or Control for Someone Else | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | |
| P | art 10: | Give Details About Environmental Information | | | | |
| For | the purp | pose of Part 10, the following definitions apply: | | | | |
| ŀ | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | |
| | | ns any location, facility, or property as defined under any environmen or used to own, operate, or utilize it, including disposal sites. | tal law, whether you now own, operate, or | | | |
| | | us material means anything an environmental law defines as a hazard ce, hazardous material, pollutant, contaminant, or similar item. | ous waste, hazardous substance, toxic | | | |
| Rep | ort all n | otices, releases, and proceedings that you know about, regardless of | when they occurred. | | | |
| 24. | Has an law? | y governmental unit notified you that you may be liable or potentially l | iable under or in violation of an environmental | | | |
| | ✓ No | s. Fill in the details. | | | | |
| 25. | ☑ No | ou notified any governmental unit of any release of hazardous materias. Fill in the details. | 1? | | | |
| 26. | Have you | ou been a party in any judicial or administrative proceeding under any | environmental law? Include settlements and | | | |
| | ✓ No ☐ Yes. Fill in the details. | | | | | |

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| | otor 1 otor 2 | Marko Alempic Marina Mijatovic | Case number (if known) | | | |
|------------|---|--|--|--|--|--|
| Ρ | art 11: | Give Details About Your Business or C | onnections to Any Business | | | |
| 27. | Within busine | | n a business or have any of the following connections to any | | | |
| | | A sole proprietor or self-employed in a trade, profes A member of a limited liability company (LLC) or lim A partner in a partnership An officer, director, or managing executive of a corp An owner of at least 5% of the voting or equity secu | ted liability partnership (LLP) oration | | | |
| | - | None of the above applies. Go to Part 12. Check all that apply above and fill in the details bel | ow for each business. | | | |
| 28. | | 2 years before you filed for bankruptcy, did you gi nncial institutions, creditors, or other parties. | re a financial statement to anyone about your business? Include | | | |
| | □ No | s. Fill in the details below. | | | | |
| Р | art 12: | Sign Below | | | | |
| tha pro | have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, por both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| X | /s/ Mar | ko Alempic X /s/ M | arina Mijatovic | | | |
| | Marko A | lempic, Debtor 1 Marin | a Mijatovic, Debtor 2 | | | |
| | Date _ | 09/06/2017 Date | 09/06/2017 | | | |
| Did | you att | ach additional pages to Your Statement of Financia | Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | |
| | No Yes | | | | | |
| Did | you pa | y or agree to pay someone who is not an attorney t | o help you fill out bankruptcy forms? | | | |
| | No Yes. N | ame of person | Attach the Bankruptcy Petition Preparer's Notice, | | | |
| _ | | · | Declaration and Signature (Official Form 110) | | | |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|-----------|--|--|
| Debtor 1 | Marko | | Alempic | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Marina | | Mijatovic | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | |
| Case number | | | | | |
| (if known) | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Hold Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), |
|--|
| fill in the information below. |

| Identify the creditor and the property that is collateral | | | What do you intend to do with the property that secures a debt? | | Did you claim the property as exempt on Schedule C? | |
|---|-----------------------|--|--|--|---|--|
| Creditor's name: | PNC Bank | | Surrender the property. Retain the property and redeem it. | | No Yes | |
| Description of property securing debt: | 2006 VW Passat | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | | |
| Creditor's name: | VW Credit | | Surrender the property. Retain the property and redeem it. | | No Yes | |
| Description of property securing debt: | Leased 2014 VW Passat | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | | |

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| Debto | | | Case number (if known) |
|---------|---|--|--|
| Pai | t 2: List Your Unexpired Pe | ersonal Property Leases | |
| fill in | the information below. Do not list re | al estate leases. Unexpired leases a | utory Contracts and Unexpired Leases (Official Form 106G), re leases that are still in effect; the lease period has not see does not assume it. 11 U.S.C. § 365(p)(2). |
| ı | Describe your unexpired personal pro | operty leases | Will this lease be assumed? |
| ı | None. | | |
| Pai | rt 3: Sign Below | | |
| | nder penalty of perjury, I declare that ersonal property that is subject to an | - | any property of my estate that secures a debt and |
| _ | / Marko Alempic arko Alempic, Debtor 1 | X /s/ Marina Mijatovic Marina Mijatovic, Debto | |
| Da | ate 09/06/2017 | Date 09/06/2017 | |

MM / DD / YYYY

MM / DD / YYYY

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Marko Alempic Marina Mijatovic CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| know | The above named Debtor hereby verifies that the ledge. | attached l | list of creditors is true and correct to the best of his/her |
|------|--|------------|--|
| Date | 9/6/2017 | | _/s/ Marko Alempic Marko Alempic |
| Date | 9/6/2017 | Signature | /s/ Marina Mijatovic Marina Mijatovic |

American Education Services P. O. Box 61047 Harrisburg, PA 17106-1047

American Express
Box 0001
Los Angeles, CA 90096-800

Arturo D Tomas, MD 1100 E Norris Drive Ottawa, IL 61350

Best Buy Credit Card Citi P. O. Box 78009 Phoenix, AZ 85062-8009

Cabelas P. O. Box 82575 Lincoln, NE 68501

Capital One Attn: General Correspondence P. O. Box 30285 Salt Lake City, UT 84130-0287

Capital One P. O. Box 6492 Carol Stream, IL 60197

Capital One Bank
P. O. Box 6492
Carol Stream, IL60197-6492

Chase Cardmember Services P. O. Box 1423 Charlotte, NC 28201-1423 Chase Slate Card
P. O. Box 1423
Charlotte, NC 28201-1423

Chase Business Credit Line Chase P. O. Box 9001022 Louisville, KY 40290-1022

Chase Card
P. O. Box 15298
Wilmington, DE 19850

Chase Ink
P. O. Box 1423
Charlotte. NC 28201

Chase Ink Cardmember Services P. O. Box 1423 Charlotte, NC 28201-1423

Chase Sapphire Card P. O. Box 15298 Wilmington, DE 19850

Chase Slate Card P. O. Box 15298 Wilmington, DE 19850

Citibank P. O. Box 183037 Columbus, OH 43218-3051

Citibank/Choice
P. O. Box 183037
Columbus, OH 43218-3051

Direct Loans
U S Department of Education
P. O. Box 105193
Atlanta, GA 30348-5193

Discover Financial Services P. O. Box 6103 Carol Stream, IL 60197-6103

IL. Designated Account Purchase Program
P. O. Box 105193
Atlanta, GA30348

Macy's Credit & Customer Service P. O. Box 8113 Mason, OH 45040

PNC Bank
P. O. Box 747066
Pittsburg, PA 15274-7066

Prosper Funding LLC 221 Main Street, Ste 300 San Francisco, CA 94105

Prosper Funding, LLC 221 Mian Street, Ste 300 San Francisco, CA 94105

Radmila Mijatovic

St. Elizabeth Medical Center Afni, Inc P. O. Box 3517 Bloomington IL 61702-3517 VW Credit P. O. Box 5125 Carol Stream, IL 60197